

F01000004208

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CLAIMSCO INTERNATIONAL INC
(Name of corporation - must include suffix)

Dear Sir or Madam:

600004509136--4
-07/31/01--01031--004
*****78.75 *****78.75

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

WILLIAM K. MILLER
(Name of Person)

W01-17771

CLAIMSCO INTERNATIONAL INC
(Firm/Company)

181 RETREAT PLACE
(Address)

PONTE VEDRA BEACH FL 32082
(City/State and Zip code)

For further information concerning this matter, please call:

WILLIAM K. MILLER at (904) 280-9334
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG -6 PM 3:45

FILED

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 1, 2001

WILLIAM K. MILLER
CLAIMSCO INTERNATIONAL INC.
181 RETREAT PLACE
PONTE VEDRA BEACH, FL 32082

SUBJECT: CLAIMSCO INTERNATIONAL, INC.
Ref. Number: W01000017771

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CLAIMSCO INTERNATIONAL, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

The FEI number listed in line 3 should be nine digits long.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 401A00044493

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. CLAIMS CO INTERNATIONAL INC
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. ILLINOIS 3. 36-3605276
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. AUGUST 24, 1988 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. AUGUST 1, 2001
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 304 SOUTH BARRINGTON RD. WAUCONDA IL 60084
(Principal office address)
- PO BOX 2526 PONTE VEDRA BEACH FL 32004-2526
(Current mailing address)

8. INVESTIGATE, NEGOTIATE AND SETTLE INSURANCE CLAIMS ON BEHALF OF INSURANCE COMPANIES AND SELF-INSURED CORPORATIONS
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: WILLIAM K. MILLER

Office Address: 181 RETREAT PLACE

PONTE VEDRA BEACH, Florida 32082
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

William K. Miller
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
01 AUG -6 PM 3:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

CLAIMSCO INTERNATIONAL, INC.

304 SOUTH BARRINGTON ROAD

WAUCONDA, IL 60084

07/01/01

DATE

8/06/01

TO LEE RIVERS - DOCUMENT SPECIALIST - DIVISION OF CORPORATIONS

SUBJECT CLAIMSCO INTERNATIONAL INC.

DATE OF ACCIDENT

N/A

CLAIM NUMBER

AS REQUESTED IN YOUR AUGUST 1ST LETTER I AM NOW
RETURNING THE DOCUMENT ALONG WITH A COPY OF YOUR
LETTER. PLEASE ACCEPT MY APOLOGIES FOR THE ERRORS
IN MY ORIGINAL SUBMISSION.

I LOOK FORWARD TO HEARING FURTHER FROM YOU IN DUE
COURSE.

YOURS TRULY

SIGNED

W. K. Miller

REPLY TO -

DATE

CLAIMSCO INTERNATIONAL INC.

181 RETREAT PLACE

PO BOX VERA BEACH FL 32082

PHONE: 877-478-1515

SIGNED

FILED
1 AUG -6 PM 3:45
CLERK OF DISTRICT COURT
TALLAHASSEE FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: WILLIAM K. MILLER

Address: 181 RETREAT PLACE

PONTE VEDRA BEACH FL 32082

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: MICHAEL HARRIS

Address: 304 SOUTH BARRINGTON RD

WAUCONDA FL 60084

Vice President: KENNETH HODGE

Address: 304 SOUTH BARRINGTON RD

WAUCONDA FL 60084

Secretary: MAXINE MILLER

Address: 181 RETREAT PLACE PONTE VEDRA BEACH FL 32082

Treasurer: AS ABOVE

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. William K. Miller

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. WILLIAM K. MILLER - CHAIRMAN

(Typed or printed name and capacity of person signing application)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

CLAIMSCO INTERNATIONAL, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE AUGUST 24, 1988, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS*****

FILED
AUG -6 PM 3:45
STATE OF ILLINOIS
CLERK OF THE COURT
JANESVILLE FLORIDA



In Testimony Whereof, I, hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 25TH *day of* JULY *A.D.* 2001

Jesse White

SECRETARY OF STATE